## FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

AMPAIGN DISCLOSURE B

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2014 JAN 17 AM 9: 02

	Reset Form				
COMMITTEE NAME (Must be same as on Statement of O	Organization)	7			
1			FORM		
IMPORTANT: Indicate by # type of committee you are reporting for	Johnstone Sheneff	1 1	DR-2	DISSI 551	
( ) Statewide/Legislative/Judge Standing for Retention Candidate	(2)State DAG (2)State		ev. 12/2009)	DISCLOSURE	
			,		
Subdivision Candidate (8) County PAC (9) City PAC (10) Scho 11) Local Ballot Issue	ool Board or Other Political Subdivision PAC (		Office Use On		
CANDIDATE COMMITTEES ONLY:		_		49	
Candidate Name	Political Party (if applicable)				
MIKE Johns TOUE	Democratic				
Office Sought Shen. f(	District (if Senate or House)	Aud	lited		
ate reports are subject to possible civil and criminal penalties. Frandidate's committee, and the chairperson, for any other type of	Pursuant to Iowa Code sections 68B.32A(7)				
A	or committee, is the individual responsible for	r filing tim	ely and accura	te reports.	
Vile 1	710 703 455	1	111	7//	
SIGNATURE OF PERSON FILING REPORT	MATURE DEPENDENT 319. 392. 4053		1-19-19		
TENSON FILING REPORT	TELEPHONE	1	DATE SI	GNED	
AM FILING A 19-2014					
	REPORT FOR (1) ELECTION /(2)		ECTION YEA	R.	
(report date)	Indicate by #	4			
CHECK IF AMENDMENT TO REPORT DATED	Loc	al Commit	ttees, enter Date	of Election	
Check if this is final (termination)			use 2		
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file		inty & Loc	al Committees	enter County in	
	which	ch Election	n is held	,	
		120	11100		
STATEMENT OF CASH ON HAN	5.000	All and a second second			
ASH ON HAND at the beginning of the reporting period. (T	otal of all funds held by the				
committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	cash on hand at the end		771	17	
ADD TOTAL MONEY TAKEN IN THIS PERIOD	macreport med.)	\$	231	. 0 _	
Schedule A: Cash Contributions total (Attach Sched	dule A) (*also see in-kind below)		(	06	
Schedule F: Loans Received total (Attach Schedule	e F)			20	
Schedule H: Total Sales of Campaign Property (Att	ach Schodulo H)		0	. 00	
(Schedule H applies to Candidates' Com	mittees Only		0	. 00	
and the prince to carididates Com			232	17	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL	\$	150	.02	
				1.11	
Schedule B: Expenditures total (Attach Schedule B)	) (**also see debts and loans below)			- 19	
Schedule F: Loan Repayments total (Attach Schedule	ule F)				
ASH ON HAND at the end of this reporting period (if final rep	port balance must be zero)	\$ _	229.	88	
The state of the s					
JNPAID BILLS (From Schedule D - Attach Schedule D)		\$	/*/	111	
JNPAID BILLS (From Schedule D - Attach Schedule D)  KIND CONTRIBUTIONS (From Schedule E - Attach Sche		\$_		100	
N KIND CONTRIBUTIONS (From Schedule E - Attach Sche	dule E)	\$	0	.00	
N KIND CONTRIBUTIONS (From Schedule E - Attach Sche DUTSTANDING LOANS (From Schedule F - Attach Schedu	dule E)	\$ _	0	.00	
UNPAID BILLS (From Schedule D - Attach Schedule D)  N KIND CONTRIBUTIONS (From Schedule E - Attach Schedule Schedule F - Attach Schedule F - Attach Schedule Schedule F - Attach Schedule Schedule G Attached?)  NOUDATE COMMITTEES ONLY:	dule E)	\$ _	0	.00	
N KIND CONTRIBUTIONS (From Schedule E - Attach Sche DUTSTANDING LOANS (From Schedule F - Attach Schedu DNSULTANT BREAKDOWN (Schedule G Attached?) ANDIDATE COMMITTEES ONLY:	dule E)le F)	\$ _	/ES X NO	60	
N KIND CONTRIBUTIONS (From Schedule E - Attach Sche DUTSTANDING LOANS (From Schedule F - Attach Schedu DNSULTANT BREAKDOWN (Schedule G Attached?)	udule E)ule F)ach Schedule H)	\$ _ \$ _ Y	0	60	

## For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Mile Johnstone, Sheniff

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	T AMOUNT	The second second second
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	The second contributor	TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Mille Tohnsmire			INCOME
7/30/13	CK#	Mile Johnstoner 17883 Kingwood ESB Middlotown, IA \$2638	Self	\$ 1.00	
	ID#	Magazione 2688			
	CK#				
	ID#				
	CK#				
	ID#				
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2	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	Marinda and American	
			OOD-TOTAL	- 1 00	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

SCHEDULE

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Reset Form MONETARY EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT **EXPENDITURES** (Rev. 07/03)

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE

PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

Committe	# to Alex	Mills Johnstone, Shei	2. Fol	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/31/13	CK#	PAM BANK STRUST D.U. BEK 928 BURLINGER, ZA 52601	Sepure change	\$2,00
1/31/13	ID#	FIR BANK + TRUST D.O. BOX 928 BARLINGTEN, TASTOOI	Sales TAX	6/4
	ID#		i	
	CK#			
	ID#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$ 9 12

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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TOTAL (if last page of this schedule)